Approved for use through 7/31/2009, OMB 0851-0032
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 10 7004 APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Oolumn 2) ··· 8MALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIO FEE RATE (\$) FEE (\$) RATE (8) (97 OFR 1.18(a), (b), or (o)) FEE (1) BEARCH FEE (87 OFR 1.16(k), (1), or (m)) EXAMINATION FEE BY OFR 1,16(0), (p), pr (ql) TOTAL CLAIMS (97. OFR 1.16(1)) minus 20 = INDEPENDENT CLAIMS = OR 07 OFR 1.16(h) minus = x If the specification and drawings exceed 100 æ Ħ APPLICATION SIZE streets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) of the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Column 3) SMALL ENTITY OR CLAIMS SMALL ENTITY HIGHEST NUMBER REMAINING PRESENT RATE (\$) after PREVIOUSLY ADDI RATE (\$) EXTRA. ADDI-AMENDMENT TIONAL MENDMEN PAID FOR Total (01 CFR 1.16(1)) FEE (\$) 9 Minus FEE (\$) 5000 Independent Of CFR 1.16(h) OR Minus ×100 0 2000 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.16(1)) OR TOTAL TOTAL ADD'L FEE OR: ADD'L FEE (Column 1) (Column 2) (Column 8) CLAIMS HIGHEST NUMBER REMAINING PRESENT AFTER AMENDMENT RATE (\$) ADDI-PREVIOUSLY EXTRA RATE (\$) ADDL TIONAL FEE (\$) PAID FOR TIONAL FEE (\$) Total profit Licen Minus Independent (III OFR 1.16(N) OR Minus = Application Size Fee (97 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 OFR 1.16(1)) OR TOTAL ADD'L FEE TOTAL OR

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.